2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742389

FILED Jan 06, 2006 Secretary of State

Entity Name: MIAMI-DADE NEIGHBORHOOD HOUSING SERVICES, INC.

Current Principal Place of Business:			New Prin	New Principal Place of Business:		
181 NE 821 MIAMI, FL						
Current Mailing Address:			New Mail	New Mailing Address:		
181 NE 82N MIAMI, FL						
FEI Number:	59-1845761	FEI Number Applied For()	FEI Number Not App	plicable () Certificate of Status Desired (X)		
Name and	Address of (Current Registered Agent:	Name and	d Address of New Registered Agent:		
3000 BISCA MIAMI, FL The above	RVICES OF G AYNE BLVD, 33137 US named entity		urpose of changing	g its registered office or registered agent, or both,		
in the State						
SIGNATUR		nic Signature of Registered Age	nt	 Date		
OFFICERS	AND DIREC			NS/CHANGES TO OFFICERS AND DIRECTOR	S:	
Title: Name: Address: City-St-Zip:	P (SHANK, ARDEI 10200 NORTH MIAMI SHORE	MIAMI AV	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DT (BLANDFORD, 3875 SW 8 ST MIAMI, FL 331		Title: Name: Address: City-St-Zip:	DT (X) Change () Addition BLANDFORD, OWEN 200 S. DIXIE HWY, #100N MIAMI, FL 33133 24		
Title: Name: Address: City-St-Zip:	DC (BROWN, MAEI 1205 NW 81 S MIAMI, FL 331	Т	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DS (X FORBES, BEV 1161 NW LITTI MIAMI, FL 331	LE RIVER DR.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (ERIC, JOHNSO 7815 NW 148 S MIAMI LAKES,	ST	Title: Name: Address: City-St-Zip:	DS (X) Change () Addition ERIC, JOHNSON 7815 NW 148 ST MIAMI LAKES, FL 33016		
Title: Name: Address: City-St-Zip:	DVC (LEE-FORBES, 14400 NW 77 (MIAMI, FL 330	CT, SUITE 200	Title: Name: Address: City-St-Zip:	()Change()Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARDEN SHANK P 01/06/2006